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<b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		<b>Complete if Known</b>	
		Application Number	09/871,543
		Filing Date	May 31, 2001
		First Named Inventor	Takurou SONE
		Examiner Name	D. G. Bonshock
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2173	
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 910.00	Attorney Docket No.	393032025600

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 03-1952
Deposit Account Name: Morrison & Foerster LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b> (All the fees below are due upon filing or may be subject to a surcharge.)							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0
							<b>Small Entity</b>
							<b>Fee (\$)</b>
<b>2. EXCESS CLAIM FEES</b>							<b>Fee (\$)</b>
<b>Fee Description</b>							<b>Fee (\$)</b>
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
							180
<b>Total Claims</b>							
19 - 21 = _____ x _____ =							0
HP = highest number of total claims paid for, if greater than 20.							
<b>Indep. Claims</b>							
3 - 3 = _____ x _____ =							0
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>							
_____ - 100 = _____ / 50 _____ (round up to a whole number) x _____ =							0
<b>4. OTHER FEE(S)</b>							<b>Fees Paid (\$)</b>
Non-English Specification, \$130 fee (no small entity discount)							0
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							790.00
1251 Extension for response within first month							120.00

<b>SUBMITTED BY</b>			
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		Date	May 19, 2006

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